U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 88-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From: O1 / O1 / 2004 Through: 12 / 31 / 3. Name and address of person filing. Name Donald J Rozick Protection File number, and address of labor organization. Name Brotherhood of Locomotive I and Trainmen Labor Organization File Number P.O. Box, Building and Room Number, if any Street 515 Depot St. City Woodville City Cleveland	2004 Engineer
3. Name and address of person filing. 4. Name, file number, and address of labor organization. Name Donald J Rozick Brotherhood of Locomotive I and Trainmen Labor Organization File Number DOCO P.O. Box, Bldg., Room No., if any P.O. Box, Building and Room Number, if any Street 515 Depot St. Street 515 Depot St.	
Name Donald J Rozick Name Brotherhood of Locomotive I and Trainmen Labor Organization File Number DOCO P.O. Box, Bldg., Room No., if any Street 515 Depot St. Street 1370 Ontario St.	Inginee
and Trainmen Labor Organization File Number DO O P.O. Box, Bildg., Room No., if any P.O. Box, Building and Room Number, if any Street 515 Depot St. Street 1370 Ontario St.	Engineer
Street 515 Depot St. Street 1370 Ontario St.	
(313 Depot St.	
City Woodville Cleveland	
State Ohio ZIP Code + 4 43469-11 2 State Ohio ZIP Code + 4 44	1113-17
5. Position in labor organization. Legislative Representative	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). 7.a. Nature of interest, Transaction, or Income.	-
6. Name and address of Employer (including trade name, if any). 7.a. Nature of Interest, Transaction, or Income. None None	
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